

**UNITED STATES BANKRUPTCY COURT
CENTRAL DISTRICT OF ILLINOIS**

In re: _____
(Debtor)

Case No. _____

Chapter _____

CERTIFICATE OF SERVICE

I, the undersigned, hereby certify that on the ____ day of _____, 20__, a copy of the Application for Payment of Unclaimed Funds and supporting documentation was served on the United States Attorney for the Central District of Illinois, by _____(method of service), at the following address:

U.S. Attorney for the Central District of Illinois
318 S. 6th Street
Springfield, IL 62701

I declare, under penalty of perjury that the foregoing is true and correct to the best of my knowledge and belief.

Submitted by: _____

Name of Firm: _____

Address: _____

Telephone Number: _____